

Public Airport Lessee Application

There is no fee required for this application.

Section 1 - General Public	Airport Information				
Name of Public Airport Applic	cant/Licensee				
Location Address of Airport _					
	xisting license)				
	port				
	Email Address				
Section 2 – General Lessee					
If lessee is an entity, please complete Section 3 – Lessee Corporate Statement for each shareholder, member or partner.					
Name of Lessee(s)					
Federal Employer Identificati	on Number				
OR					
Social Security Number					
Business Business					
	Cell Phone				
Fax	Email Address				
Mailing Address					
	(Street Address, City, State Zip Code)				

Section 3 – Lessee Corporate Statement

All entities, except sole proprietorships, must provide the following information for all shareholders, members or partners. Please include additional pages if necessary.

Please Print

1	Shareholder, Member or Partner Name		SSN
	Address		
	Date of Birth	Actual Number of Shares and % of Owner	rship
2	Shareholder, Member or Partner Name		SSN
	Address		
	Date of Birth	Actual Number of Shares and % of Owner	rship
3	Shareholder, Member or Partner Name		SSN
	Address		
	Date of Birth Actual Number of Shares and % of Owner		rship
4	Shareholder, Member or Partner Name		SSN
	Address		
	Date of Birth	Actual Number of Shares and % of Owner	rship

Officers and Directors

1	Officer or Director Name		SSN (optional)	
Address				
	Date of Birth (optional)	Title		
2	Officer or Director Name		SSN (optional)	
	Address			
	Date of Birth (optional)	Title		
3	Officer or Director Name		SSN (optional)	
	Address			
	Date of Birth (optional)	Title		
4	Officer or Director Name		SSN (optional)	
	Address			
	Date of Birth (optional)	Title		

Section 4 - Additional Application Materials

Special Instructions: If personal history statements and fingerprint cards are included with your application, you are required to enclose them in the "Confidential" Envelope provided. These are confidential documents and must be kept separate from your other application documents.

- A copy of any lease and any concession or other agreement between the lessee and the agency that owns and
 operates the airport;
- A floor plan of the area to be leased, using approximate dimensional measurements, including external dimensions and general layout on an 8-1/2" x 11" sheet of paper. On the floor plan you will need to clearly mark the areas where alcohol will be served, sold and stored. The floor plan must contain outside dimensions, the name of the establishment, physical address and date;
- A copy of the bank signature card for the account from which the lessee's operating expenses will be paid;
- Federal Employer Identification Number (FEIN) as filed with the Internal Revenue Service (IRS). You can apply for a FEIN on the IRS website at www.irs.gov by clicking on the link under Online Services;
- A copy of the management agreement the lessee has entered into with any individual who manages or will manage the day-to-day business of the liquor operation;
- A personal history statement and two fingerprint cards for each individual involved in the ownership, lease or management of the liquor operation. (See Special Instructions regarding personal history statements and fingerprint cards.)
- Liquor Division Authorization to Disclose Tax Information form.

Section 5 - Declaration and Affidavit

Helena, MT 59624-1712

I declare under penalty of false swearing that I am the applicant or the duly authorized representative of the entity making this application, and that the responses provided, including any accompanying information, are true, correct and complete.						
Signature	Date	Printed Name	Title			
Mail completed applica	tion and all required and	applicable documents to:				
Montana Departm Liquor Control Div PO Box 1712						

Questions? Call us toll free at 1-866-859-2254 (in Helena, 444-6900), or fax 406-444-0722.